
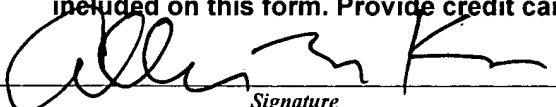


6/30/05

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AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. MDS-10202/03	
Applicant(s): Michael D. Seidman					
Application No. 10/715,148	Filing Date 11/17/2003	Examiner Leslie A. Royds	Customer No. 25006	Group Art Unit 1614	Confirmation No. 4310
Invention: NUTRITIONAL SUPPLEMENT ENHANCING MITOCHONDRIAL FUNCTION					
 COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	21 =	0	x \$9.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$43.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-1180 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ Signature			Dated: 6/29/2005		
Allen M. Krass, Reg. No. 18,277 Gifford, Krass, Groh, Sprinkle, Anderson & Citkowski, P.C. P.O. Box 7021 Troy, MI 48007-7021 248-647-6000			I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ _____ (Date)		
			_____ Signature of Person Mailing Correspondence		
			_____ Typed or Printed Name of Person Mailing Correspondence		
CC:					

Serial No. 10/715,148

Response to Office Action of March 29, 2005



Attorney Docket No. MDS-10202/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Michael D. Seidman

Serial No.: 10/715,148

Group Art Unit: 1614

Filing Date: November 17, 2003

Examiner: Leslie A. Royds

For: NUTRITIONAL SUPPLEMENT ENHANCING MITOCHONDRIAL
FUNCTION

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed March 29, 2005, please amend the above-identified patent application as follows: